

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Middle Class Values PAC

ADDRESS (number and street) ▼

PO Box 15559

☐ Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00594507

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☒ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

04

01

2016

06

30

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Rachel Headley

Signature of Treasurer

Rachel Headley

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

07

15

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Middle Class Values PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 04 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y
 06 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19)	36150.00	36150.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	36150.00	36150.00
7. Total Disbursements (from Line 31)	34484.86	34484.86
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1665.14	1665.14
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Middle Class Values PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
04		01		2016

To:

M M	/	D D	/	Y Y Y Y Y Y
06		30		2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

36000.00

36000.00

(ii) Unitemized

150.00

150.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

36150.00

36150.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

36150.00

36150.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

36150.00

36150.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

36150.00

36150.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	7620.88	7620.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7620.88	7620.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	26863.98	26863.98
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	34484.86	34484.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34484.86	34484.86

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	36150.00	36150.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36150.00	36150.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	7620.88	7620.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	7620.88	7620.88

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 16

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Middle Class Values PAC

Full Name (Last, First, Middle Initial)

A. Jennifer Alexander

Mailing Address 312 Summer Palace Way

City State Zip Code
 Las Vegas NV 89144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Golf Professional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 20 / 2016

Transaction ID : SA11AI.4116

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

B. Lovee Arum

Mailing Address 36 Gulf Stream Ct

City State Zip Code
 Las Vegas NV 89113

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 10 / 2016

Transaction ID : SA11AI.4124

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Diana Bennett

Mailing Address 6650 Via Austi Parkway

City State Zip Code
 Las Vegas NV 89119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Paragon Gaming

Occupation

Chairman of the Board

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 06 / 2016

Transaction ID : SA11AI.4122

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Middle Class Values PAC

Full Name (Last, First, Middle Initial)

A. Robert Boughner

Mailing Address 1 Hughes Center Drive 3503

City State Zip Code
 Las Vegas NV 89169

FEC ID number of contributing
federal political committee.

C

Name of Employer

Boyd Gaming Corporation

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 07 / 2016

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

B. Michael Brown

Mailing Address 36 Lone Hollow Drive

City State Zip Code
 Sandy UT 84092

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barrick Gold Corporation USA

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 31 / 2016

Transaction ID : SA11AI.4120

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

C. Robert Casey

Mailing Address 116 Hoffman Rd

City State Zip Code
 Glenshaw PA 15116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 02 / 2016

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Middle Class Values PAC

Full Name (Last, First, Middle Initial)

A. Lewis Fanger

Mailing Address 222 Karen Ave Unit 1207

City State Zip Code
 Las Vegas NV 89109

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Full House Resorts

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 23 / 2016

Transaction ID : SA11AI.4118

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

B. Friedmutter Group

Mailing Address 4022 Dean Martin Drive

City State Zip Code
 Las Vegas NV 89103

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 25 / 2016

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lynne Honickman

Mailing Address 201 W. Rittenhouse Sw.

City State Zip Code
 Philadelphia PA 19103

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

The Honickman Foundation

Founder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 13 / 2016

Transaction ID : SA11AI.4112

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Middle Class Values PAC

Full Name (Last, First, Middle Initial)

A. Ellis Landau

Mailing Address 7571 Silver Meadow Court

City State Zip Code
 Las Vegas NV 89117

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 19 / 2016

Transaction ID : SA11AI.4114

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

B. Elaine Wynn

Mailing Address One Hughes Center Drive

City State Zip Code
 Las Vegas NV 89169

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wynn Resorts

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016

Transaction ID : SA11AI.4113

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10000.00

36000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 16

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Middle Class Values PAC

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address P.O. Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M = M / D = D / Y = Y - Y - Y - Y
06 / 30 / 2016

Transaction ID : SA11C.4111

Amount of Each Receipt this Period

24500.00

☒ Memo Item

Total Through Conduit This Reporting Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M = M / D = D / Y = Y - Y - Y - Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M = M / D = D / Y = Y - Y - Y - Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Middle Class Values PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer St

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2016

Transaction ID : SB21B.4129

Amount of Each Disbursement this Period

276.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer St

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2016

Transaction ID : SB21B.4133

Amount of Each Disbursement this Period

197.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 366 Summer St

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2016

Transaction ID : SB21B.4134

Amount of Each Disbursement this Period

39.50

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

513.50

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Middle Class Values PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer St

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : SB21B.4135

Amount of Each Disbursement this Period

197.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer St

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2016

Transaction ID : SB21B.4137

Amount of Each Disbursement this Period

197.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Angel CombsMailing Address 27 Loomis Drive
Apt. B1

City	State	Zip Code
Wes Hartford	CT	06107

Purpose of Disbursement
Consultant - Fundraising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2016

Transaction ID : SB21B.4153

Amount of Each Disbursement this Period

4504.50

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4899.50

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Middle Class Values PAC

Full Name (Last, First, Middle Initial)

A. Patriot Contact

Mailing Address PO Box 65522

City
WashingtonState
DCZip Code
20035Purpose of Disbursement
Consultant - Management

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

Transaction ID : SB21B.4147

Amount of Each Disbursement this Period

271.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Patriot Contact

Mailing Address PO Box 65522

City
WashingtonState
DCZip Code
20035Purpose of Disbursement
Consultant - Management

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2016

Transaction ID : SB21B.4154

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Patriot Contact

Mailing Address PO Box 65522

City
WashingtonState
DCZip Code
20035Purpose of Disbursement
Consultant - Management

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : SB21B.4151

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1871.43

7284.43

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 14 OF 16
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Middle Class Values PAC			FEC IDENTIFICATION NUMBER ▼ C C00594507		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY					
Full Name of Payee Facebook			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 13 / 2016		
Mailing Address 1 Hacker Way			Amount 1503.58		
City Menlo Park		State CA	Zip Code 94205		Transaction ID : SE.4166
Purpose of Expenditure Online Advertising		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 13 / 2016	
Name of Federal Candidate Susie Lee			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 25863.98			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Patriot Contact			Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 25 / 2016		
Mailing Address PO Box 65522			Amount 1000.00		
City Washington		State DC	Zip Code 20035		Transaction ID : SE.4156
Purpose of Expenditure Online Advertising		Category/Type 		Date of Disbursement or Obligation MM / DD / YYYYYY 04 / 25 / 2016	
Name of Federal Candidate Daniel Muroff			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought 1000.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			2503.58		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Rachel Headley</u>			Date MM / DD / YYYYYY 07 / 15 / 2016		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 15 OF 16
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Middle Class Values PAC			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00594507</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY</div>					
Full Name of Payee Resonance Campaigns			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">06 / 01 / 2016</div>		
Mailing Address 1020 16th St, NW Suite 701			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">9905.82</div>		
City State Zip Code Washington DC 20036		Transaction ID : SE.4159 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05 / 31 / 2016</div>			
Purpose of Expenditure Direct Mail		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		Name of Federal Candidate Susie Lee	
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">9905.82</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Resonance Campaigns			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">06 / 03 / 2016</div>		
Mailing Address 1020 16th St, NW Suite 701			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6357.23</div>		
City State Zip Code Washington DC 20036		Transaction ID : SE.4162 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">06 / 03 / 2016</div>			
Purpose of Expenditure Direct Mail		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		Name of Federal Candidate Susie Lee	
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">16263.05</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">16263.05</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Rachel Headley</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">07 / 15 / 2016</div>		
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 16 OF 16
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Middle Class Values PAC			FEC IDENTIFICATION NUMBER ▼ C C00594507		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee Resonance Campaigns			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> 06 / 08 / 2016		
Mailing Address 1020 16th St, NW Suite 701			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">8097.35</div>		
City Washington		State DC	Zip Code 20036		Transaction ID : SE.4164
Purpose of Expenditure Direct Mail		Category/Type		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> 06 / 09 / 2016	
Name of Federal Candidate Susie Lee			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">24360.40</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination		
Mailing Address			Amount		
City		State	Zip Code		Date of Disbursement or Obligation
Purpose of Expenditure		Category/Type		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate			<input type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">8097.35</div>					
(b) SUBTOTAL of Unitemized Independent Expenditures ▶ <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>					
(c) TOTAL Independent Expenditures..... ▶ <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">26863.98</div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Rachel Headley</u>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> 07 / 15 / 2016		[Electronically Filed]